

SENDER COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits. *Richards*

1. Article Addressed to:

Thumell Thomas
120 W. Church St.
Pring AL 36081
order # 4 e' comp (40)

2. Article Number
 (Transfer from service label)

7003 2260 0005 4584 5463

PS Form 3811, February 2004

Domestic Return Receipt

06-239

102595-02-M-1540

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Della Frazee*

☐ Agent

☐ Addressee

B. Received by (Printed Name)

DELLA FRAZEE

C. Date of Delivery

3-21-06

D. Is delivery address different from item 1?

☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail

☐ Express Mail

☒ Registered

☒ Return Receipt for Merchandise

☐ Insured Mail

☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits. *Richards*

1. Article Addressed to:

Long Wheeler
120 W. Church St.
Troy AZ 86081
order # 4 i cup (40)

2. Article Number

(Transfer from service label)

7003 2260 0005 4584 5470

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Debra Flazin*☐ Agent☐ Addressee

B. Received by (Printed Name)

Debra Flazin

C. Date of Delivery

3-21-06

D. Is delivery address different from item 1?

If YES, enter delivery address below:

☐ Yes☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☒ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

102595-02-M-1540

06-239

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits. *Richard*

1. Article Addressed to:

Mrs. Olivia
120 W. Church St.
Tracy AL 36081
order #4 incop (40)

2. Article Number

(Transfer from service label)

7003 2260 0005 4584 5456

PS Form 3811, February 2004

Domestic Return Receipt

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X Debra Fife☐ Agent☐ Addressee

B. Received by (Printed Name)

Debra Fife

C. Date of Delivery

*3-21-06*D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below:

☐ No

3. Service Type

☒ Certified Mail☐ Express Mail☒ Registered☒ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes*06-239*

102595-02-M-1540